

Fill in this information to identify your case:

United States Bankruptcy Court for the:

CENTRAL DISTRICT OF CALIFORNIA

Case number (if known)

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Lisa

First name

Ceran

Middle name

Clements

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Lisa Kay Ceran

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-5256

Debtor 1 Lisa Ceran Clements**About Debtor 1:****4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

- I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

EINs

About Debtor 2 (Spouse Only in a Joint Case):

- I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live**44984 Bellflower Lane
Temecula, CA 92592**

Number, Street, City, State & ZIP Code

Riverside

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy**Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Lisa Ceran Clements****Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.
- Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13
8. **How you will pay the fee** I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
9. **Have you filed for bankruptcy within the last 8 years?** No.
 Yes.
 District _____ When _____ Case number _____
 District _____ When _____ Case number _____
 District _____ When _____ Case number _____
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** No
 Yes.
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
11. **Do you rent your residence?** No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Lisa Ceran Clements**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Lisa Ceran Clements****Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?	<p>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</p> <p><input type="checkbox"/> No. Go to line 16b.</p> <p><input checked="" type="checkbox"/> Yes. Go to line 17.</p>		
	<p>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</p> <p><input type="checkbox"/> No. Go to line 16c.</p> <p><input type="checkbox"/> Yes. Go to line 17.</p>		
	<p>16c. State the type of debts you owe that are not consumer debts or business debts</p> <hr/>		
<hr/>			
17. Are you filing under Chapter 7?	<p><input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.</p> <p><input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>		
<hr/>			
18. How many Creditors do you estimate that you owe?	<p><input checked="" type="checkbox"/> 1-49</p> <p><input type="checkbox"/> 50-99</p> <p><input type="checkbox"/> 100-199</p> <p><input type="checkbox"/> 200-999</p>	<p><input type="checkbox"/> 1,000-5,000</p> <p><input type="checkbox"/> 5001-10,000</p> <p><input type="checkbox"/> 10,001-25,000</p>	<p><input type="checkbox"/> 25,001-50,000</p> <p><input type="checkbox"/> 50,001-100,000</p> <p><input type="checkbox"/> More than 100,000</p>
<hr/>			
19. How much do you estimate your assets to be worth?	<p><input type="checkbox"/> \$0 - \$50,000</p> <p><input type="checkbox"/> \$50,001 - \$100,000</p> <p><input checked="" type="checkbox"/> \$100,001 - \$500,000</p> <p><input type="checkbox"/> \$500,001 - \$1 million</p>	<p><input type="checkbox"/> \$1,000,001 - \$10 million</p> <p><input type="checkbox"/> \$10,000,001 - \$50 million</p> <p><input type="checkbox"/> \$50,000,001 - \$100 million</p> <p><input type="checkbox"/> \$100,000,001 - \$500 million</p>	<p><input type="checkbox"/> \$500,000,001 - \$1 billion</p> <p><input type="checkbox"/> \$1,000,000,001 - \$10 billion</p> <p><input type="checkbox"/> \$10,000,000,001 - \$50 billion</p> <p><input type="checkbox"/> More than \$50 billion</p>
<hr/>			
20. How much do you estimate your liabilities to be?	<p><input type="checkbox"/> \$0 - \$50,000</p> <p><input type="checkbox"/> \$50,001 - \$100,000</p> <p><input checked="" type="checkbox"/> \$100,001 - \$500,000</p> <p><input type="checkbox"/> \$500,001 - \$1 million</p>	<p><input type="checkbox"/> \$1,000,001 - \$10 million</p> <p><input type="checkbox"/> \$10,000,001 - \$50 million</p> <p><input type="checkbox"/> \$50,000,001 - \$100 million</p> <p><input type="checkbox"/> \$100,000,001 - \$500 million</p>	<p><input type="checkbox"/> \$500,000,001 - \$1 billion</p> <p><input type="checkbox"/> \$1,000,000,001 - \$10 billion</p> <p><input type="checkbox"/> \$10,000,000,001 - \$50 billion</p> <p><input type="checkbox"/> More than \$50 billion</p>

Part 7: Sign Below

For you	<p>I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.</p> <p>If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.</p> <p>If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.</p>
<p>/s/ Lisa Ceran Clements</p> <p>Lisa Ceran Clements</p> <p>Signature of Debtor 1</p>	
<p>Executed on <u>September 7, 2017</u></p> <p>MM / DD / YYYY</p>	<p>Executed on _____</p> <p>MM / DD / YYYY</p>
<p>Signature of Debtor 2</p>	

Debtor 1 Lisa Ceran Clements**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ Arnold H. Wuhrman
Signature of Attorney for Debtor

Date

September 7, 2017
MM / DD / YYYY

Arnold H. Wuhrman

Printed name

Serenity Legal Services, P.C.

Firm name

41667 Ivy Street

Suite F-6

Murrieta, CA 92562

Number, Street, City, State & ZIP Code

Contact phone 951-304-3720

Email address

Wuhrman@SerenityLLS.com

167183

Bar number & State

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA - RIVERSIDE DIVISION

Attorney or Party Name, Address, Telephone & FAX Nos.,
State Bar No. & Email Address
Arnold H. Wuhrman, State Bar No. 167183
SERENITY LEGAL SERVICES, P.C.
41667 Ivy Street, Suite, F-6, Murrieta, CA 92562
Tel. 951-304-3720; Fax 951-848-9340
E-Mail: Wuhrman@SerenityLLS.com

Attorney for: Debtor(s)

In re:

LISA CERAN CLEMENTS aka LISA KAY CERAN,

Debtor(s).

CASE NO.:

CHAPTER: 7

ADVERSARY NO.:
(if applicable)

**ELECTRONIC FILING DECLARATION
(INDIVIDUAL)
[LBR 1002-1(f)]**

- Petition, statement of affairs, schedules or lists
 Amendments to the petition statements of affairs, schedules or lists
 Other (specify): _____

Date filed: 09/08/2017

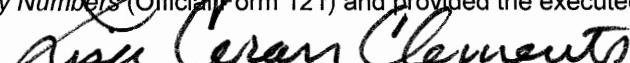
Date filed: _____

Date filed: _____

PART I – DECLARATION OF DEBTOR(S) OR OTHER PARTY

I (We), the undersigned Debtor(s) or other party on whose behalf the above-referenced document is being filed (Signing Party), declare under penalty of perjury that: (1) I have read and understand the above-referenced document being filed electronically (Filed Document); (2) the information provided in the Filed Document is true, correct and complete; (3) the “/s/,” followed by my name, on the signature line(s) for the Signing Party in the Filed Document serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature line(s); (4) I have actually signed a true and correct printed copy of the Filed Document in such places and provided the executed printed copy of the Filed Document to my attorney; and (5) I have authorized my attorney to file the electronic version of the Filed Document and this Declaration with the United States Bankruptcy Court for the Central District of California. If the Filed Document is a petition, I further declare under penalty of perjury that I have completed and signed a Statement About Your Social Security Numbers (Official Form 121) and provided the executed original to my attorney.

Date: 09/07/2017


Signature (handwritten) of Debtor or signing party

Lisa Ceran Clements

Printed name of signing party

Date: _____

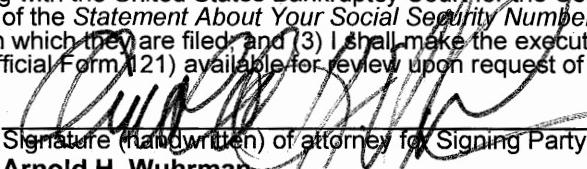
Signature (handwritten) of Debtor 2 (Joint Debtor)(if applicable)

Printed name of Debtor 2, if applicable

PART II – DECLARATION OF ATTORNEY FOR SIGNING PARTY

I, the undersigned attorney for the Signing Party, declare under penalty of perjury that: (1) the “/s/,” followed by my name, on the signature lines for the attorney for the Signing Party in the Filed Document serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature lines; (2) the Signing Party signed Part 1 - Declaration of Debtor(s) or Other Party of this Declaration before I electronically submitted the Filed Document for filing with the United States Bankruptcy Court for the Central District of California; (3) I have actually signed a true and correct printed copy of the Filed Document in the locations that are indicated by “/s/,” followed by my name, and have obtained the signature(s) of the Signing Party in the locations that are indicated by “/s/,” followed by the Signing Party’s name, on the true and correct printed copy of the Filed Document; (4) I shall maintain the executed originals of this Declaration and the Filed Document for a period of five years after the closing of the case in which they are filed; and (5) I shall make the executed originals of this Declaration and the Filed Document available for review upon request of the court or other parties. If the Filed Document is a petition, I further declare under penalty of perjury that: (1) the Signing Party completed and signed the Statement About Your Social Security Numbers (Official Form 121) before I electronically submitted the Filed Document for filing with the United States Bankruptcy Court for the Central District of California; (2) I shall maintain the executed original of the Statement About Your Social Security Numbers (Official Form 121) for a period of five years after the closing of the case in which they are filed; and (3) I shall make the executed original of the Statement About Your Social Security Numbers (Official Form 121) available for review upon request of the court.

Date: 09/07/2017


Signature (handwritten) of attorney for Signing Party

Arnold H. Wuhrman

Printed Name of attorney for Signing Party

This form is mandatory. It has been approved for use by the United States Bankruptcy Court for the Central District of California.

**STATEMENT OF RELATED CASES
INFORMATION REQUIRED BY LBR 1015-2
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA**

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at Murrieta, California.

/s/ Lisa Ceran Clements

Lisa Ceran Clements

Signature of Debtor

Date: September 7, 2017

Signature of Joint Debtor

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		CENTRAL DISTRICT OF CALIFORNIA	
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 400,000.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 400,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 79,591.18
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 479,591.18

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 480,103.56
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 480,103.56
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 6,879.37
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 6,879.37
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 2,675.11
		Your total liabilities \$ 489,658.04

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	\$ 6,820.23
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 6,820.23

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Lisa Ceran Clements

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 4,634.33

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>6,879.37</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>6,879.37</u>

Fill in this information to identify your case and this filing:

Debtor 1	Lisa Ceran Clements	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Last Name	
	First Name	Middle Name
Last Name		
United States Bankruptcy Court for the: <u>CENTRAL DISTRICT OF CALIFORNIA</u>		
Case number _____		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1

45377 Clubhouse Drive

Street address, if available, or other description

Temecula CA 92592-0000

City State ZIP Code

Riverside

County

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$400,000.00

Current value of the portion you own?

\$400,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Joint tenant

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$400,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 Lisa Ceran Clements**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles** No Yes

3.1 Make: Toyota
 Model: Camry
 Year: 2003
 Approximate mileage: 123240
 Other information:

Who has an interest in the property? Check one

- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
- Check if this is community property**
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the
entire property?Current value of the
portion you own?\$3,359.00\$3,359.00**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes

4.1 Make: Thor
 Model: Jazz 2780 5th Wheel
 Year: 2005

Who has an interest in the property? Check one

- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
- Check if this is community property**
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the
entire property?Current value of the
portion you own?\$0.00\$0.00

Other information:

Debtor's interest in this property was awarded to her ex-husband in their dissolution of marriage judgment, dated 5/20/2016, but he has not yet transferred title out of her name; accordingly, Debtor has no actual interest in the property and is just listing it as a precaution

4.2 Make: _____
 Model: _____
 Year: _____

Who has an interest in the property? Check one

- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
- Check if this is community property**
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the
entire property?Current value of the
portion you own?\$350.00\$350.00

Other information:

Used bike hitches

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$3,709.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the
portion you own?Do not deduct secured
claims or exemptions.**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe.....

Debtor 1

Lisa Ceran Clements**Used household furnishings****\$4,000.00****7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe.....

Three (3) used televisions, 1 MacBook computer (5 years old), 1 Ipad II (7 years old), 1 Ipad Pro, 1 Keypad, 1 Apple Pen, Apple Care Plan, 1 Printer, 1 Neat Scanner

\$2,500.00**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....**1 Tabora painting****\$3,600.00****1 set of 8 fine silverware****\$2,000.00****Department 56 Halloween and North Pole Villages figurines****\$1,500.00****9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....**Animal trailer for Pedego Electric Bike****\$300.00****1 stationary bike****\$75.00****2 Electra Townies bicycles****\$1,000.00****10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.....**1 Glock 26 pistol****\$500.00****11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.....**Used household clothing****\$500.00****12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No

Debtor 1 Lisa Ceran Clements Yes. Describe.....

Jewelry.	\$2,000.00
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13. Non-farm animals*Examples:* Dogs, cats, birds, horses No Yes. Describe.....

Three (3) shihtsu dogs -- all neutered and elderly (ages 10-14)	\$10.00
--	----------------

14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information.....

2017 Pedego City Commuter electric bike, with helmet, lock and other assorted small accessories	\$3,000.00
--	-------------------

CPAP machine	\$10.00
---------------------	----------------

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**\$20,995.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash	\$60.00
-------------	----------------

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking & Savings	Chase Bank	\$2,068.59
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17.2. Debit card	Direct Express (Solely Disability Funds from SSDI)	\$1,240.92
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17.3. Checking & Savings	Navy Federal Credit Union	\$0.09
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18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

Debtor 1 Lisa Ceran Clements**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account:

Institution name:

IRAAmeriprise\$44,565.35**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes..... Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information.....

Debtor 1

Lisa Ceran Clements**Spousal support -- \$1,400 per month**

\$1,400.00

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information..**Social Security disability benefits -- \$2,185.90 per month**

\$2,185.90

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**Cigna Insurance Disability Benefits --
\$2,561 per month, plus survivor benefit****Debtor, and Debtor's
heirs if she passes
away**

\$2,561.00

**Required term life insurance on
ex-spouse (\$100,000 face value) -- not
sure if policy has ever actually been
acquired****Debtor**

\$0.00

**URS Corporation reimbursement for
health insurance for Debtor and her
daughter -- \$483.33 per month**

\$483.33

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....**35. Any financial assets you did not already list** No Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$54,565.18

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debtor 1 Lisa Ceran Clements

37. Do you own or have any legal or equitable interest in any business-related property?

- No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- No
 Yes. Give specific information.....

San Diego Zoo membership	\$167.00
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American Horticultural Society membership	\$25.00
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Huntington Library membership	\$130.00
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54. Add the dollar value of all of your entries from Part 7. Write that number here

	\$322.00
--	----------

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2	<u>\$400,000.00</u>
56. Part 2: Total vehicles, line 5	<u>\$3,709.00</u>
57. Part 3: Total personal and household items, line 15	<u>\$20,995.00</u>
58. Part 4: Total financial assets, line 36	<u>\$54,565.18</u>
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	<u>+ \$322.00</u>
62. Total personal property. Add lines 56 through 61...	<u>\$79,591.18</u> Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	<u>\$479,591.18</u>

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		CENTRAL DISTRICT OF CALIFORNIA	
Case number (if known)			

Check if this is an amended filing

Official Form 106C**Schedule C: The Property You Claim as Exempt**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt**1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.**

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>	
2003 Toyota Camry 123240 miles Line from <i>Schedule A/B: 3.1</i>	\$3,359.00	<input checked="" type="checkbox"/> \$5,350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(2)
Used bike hitches Line from <i>Schedule A/B: 4.2</i>	\$350.00	<input checked="" type="checkbox"/> \$350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Used household furnishings Line from <i>Schedule A/B: 6.1</i>	\$4,000.00	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
Three (3) used televisions, 1 MacBook computer (5 years old), 1 Ipad II (7 years old), 1 Ipad Pro, 1 Keypad, 1 Apple Pen, Apple Care Plan, 1 Printer, 1 Neat Scanner Line from <i>Schedule A/B: 7.1</i>	\$2,500.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
1 Tabora painting Line from <i>Schedule A/B: 8.1</i>	\$3,600.00	<input checked="" type="checkbox"/> \$3,600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)

Debtor 1 Lisa Ceran Clements

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B.	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
1 set of 8 fine silverware Line from Schedule A/B: 8.2	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <u>\$2,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Department 56 Halloween and North Pole Villages figurines Line from Schedule A/B: 8.3	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$1,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Animal trailer for Pedego Electric Bike Line from Schedule A/B: 9.1	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
1 stationary bike Line from Schedule A/B: 9.2	<u>\$75.00</u>	<input checked="" type="checkbox"/> <u>\$75.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
2 Electra Townies bicycles Line from Schedule A/B: 9.3	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Used household clothing Line from Schedule A/B: 11.1	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
Jewelry. Line from Schedule A/B: 12.1	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(4)
Jewelry. Line from Schedule A/B: 12.1	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Three (3) shihtsu dogs -- all neutered and elderly (ages 10-14) Line from Schedule A/B: 13.1	<u>\$10.00</u>	<input checked="" type="checkbox"/> <u>\$10.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
2017 Pedego City Commuter electric bike, with helmet, lock and other assorted small accessories Line from Schedule A/B: 14.1	<u>\$3,000.00</u>	<input checked="" type="checkbox"/> <u>\$3,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(9)
CPAP machine Line from Schedule A/B: 14.2	<u>\$10.00</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(9)
Cash Line from Schedule A/B: 16.1	<u>\$60.00</u>	<input checked="" type="checkbox"/> <u>\$60.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)

Debtor 1 Lisa Ceran Clements

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B.	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Checking & Savings: Chase Bank Line from Schedule A/B: 17.1	\$2,068.59	<input checked="" type="checkbox"/> \$2,068.59 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Debit card: Direct Express (Solely Disability Funds from SSDI) Line from Schedule A/B: 17.2	\$1,240.92	<input checked="" type="checkbox"/> \$1,240.92 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(10)(A)
Checking & Savings: Navy Federal Credit Union Line from Schedule A/B: 17.3	\$0.09	<input checked="" type="checkbox"/> \$5.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
IRA: Ameriprise Line from Schedule A/B: 21.1	\$44,565.35	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)
Spousal support -- \$1,400 per month Line from Schedule A/B: 29.1	\$1,400.00	<input checked="" type="checkbox"/> \$1,400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(10)(D)
Social Security disability benefits -- \$2,185.90 per month Line from Schedule A/B: 30.1	\$2,185.90	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(10)(A)
Cigna Insurance Disability Benefits -- \$2,561 per month, plus survivor benefit Beneficiary: Debtor, and Debtor's heirs if she passes away Line from Schedule A/B: 31.1	\$2,561.00	<input checked="" type="checkbox"/> \$2,561.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(10)(C)
Required term life insurance on ex-spouse (\$100,000 face value) -- not sure if policy has ever actually been acquired Beneficiary: Debtor Line from Schedule A/B: 31.2	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(7)
URS Corporation reimbursement for health insurance for Debtor and her daughter -- \$483.33 per month Line from Schedule A/B: 31.3	\$483.33	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
San Diego Zoo membership Line from Schedule A/B: 53.1	\$167.00	<input checked="" type="checkbox"/> \$167.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
American Horticultural Society membership Line from Schedule A/B: 53.2	\$25.00	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)

Debtor 1 Lisa Ceran Clements

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Huntington Library membership Line from <i>Schedule A/B</i> : 53.3	\$130.00	<input checked="" type="checkbox"/> \$130.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		CENTRAL DISTRICT OF CALIFORNIA	
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Creditor's Name	Describe the property that secures the claim:	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Bank of America	45377 Clubhouse Drive Temecula, CA 92592, Riverside County; debt is listed as disputed because it is only a lien against the property, with no recourse against Debtor	\$113,352.74	\$400,000.00	\$78,655.74
PO Box 31785 Tampa, FL 33631-3785	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed			
Number, Street, City, State & Zip Code	Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____			
Who owes the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred	Opened 07/06 Last Active 09/11	Last 4 digits of account number	6644	

Creditor's Name	Describe the property that secures the claim:	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.2 Navy Federal Credit Union	Checking & Savings: Navy Federal Credit Union	\$1,447.82	\$0.09	\$1,447.73
PO Box 3000 Merrifield, VA 22119	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Number, Street, City, State & Zip Code	Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit			
Who owes the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				

Debtor 1 **Lisa Ceren Clements**

First Name Middle Name Last Name

Case number (if known) _____

Check if this claim relates to a community debt

Other (including a right to offset) **Setoff right**

**Opened
12/14 Last
Active**

Date debt was incurred **3/27/17**

Last 4 digits of account number **9736**

2.3	Seterus Inc	Describe the property that secures the claim:	\$365,303.00	\$400,000.00	\$0.00
-----	--------------------	---	---------------------	---------------------	---------------

Creditor's Name

**14523 SW Millikan Way
Street
Beaverton, OR 97005**

Number, Street, City, State & Zip Code

**45377 Clubhouse Drive Temecula,
CA 92592 Riverside County**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

**Opened
07/06 Last
Active 05/17**

Date debt was incurred

Last 4 digits of account number **6514**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$480,103.56

If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

\$480,103.56

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

- | | | |
|--------------------------|---|--|
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Navy Federal Credit Union
PO Box 3700
Merrifield, VA 22119 | On which line in Part 1 did you enter the creditor? 2.2 |
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Real Time Resolutions
4909 Savarese Circle
Tampa, FL 33634 | On which line in Part 1 did you enter the creditor? 2.1 |
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Real Time Resolutions
Attn: Bankruptcy
PO Box 36655
Dallas, TX 75235 | On which line in Part 1 did you enter the creditor? 2.1 |
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Seterus, Inc.
14523 SW Millikan Way Street
Beaverton, OR 97005 | On which line in Part 1 did you enter the creditor? 2.3 |

Debtor 1 **Lisa Ceran Clements**

First Name

Middle Name

Last Name

Case number (if known)

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		CENTRAL DISTRICT OF CALIFORNIA	
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1			
Internal Revenue Service	<u>Last 4 digits of account number</u> 5256	\$6,879.37	\$3,433.51
Priority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101-7346			\$3,445.86
Number Street City State Zip Code			
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
	Federal income tax.		

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1 Lisa Ceran Clements

4.1 Kohl's/Capital One Nonpriority Creditor's Name <hr/> PO Box 3043 Milwaukee, WI 53201-3043 Number Street City State Zip Code <hr/> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 0080 \$277.29 When was the debt incurred? Opened 03/15 Last Active 3/29/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account
<hr/> 4.2 Law Office of H. William Edgar Nonpriority Creditor's Name <hr/> 6800 Indiana Ave., Suite 150 Riverside, CA 92506 Number Street City State Zip Code <hr/> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number Clements \$1,607.25 When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Legal fees.	
<hr/> 4.3 Rainbow Canyon Villages HOA Nonpriority Creditor's Name <hr/> c/o S&L Association Management PO Box 929 Murrieta, CA 92564 Number Street City State Zip Code <hr/> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number Unknown When was the debt incurred? Ongoing As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts Homeowners' association dues -- no current amount due, but assessment for alleged non-compliance with certain codes may be coming. <input checked="" type="checkbox"/> Other. Specify Homeowners' association dues -- no current amount due, but assessment for alleged non-compliance with certain codes may be coming.	

Debtor 1 Lisa Cieran Clements

4.4	Sprint	Last 4 digits of account number	<u>1659</u>	\$790.57
Nonpriority Creditor's Name P.O. Box 4191 Carol Stream, IL 60197-4191		When was the debt incurred?	<u>2017</u>	
Number Street City State Zip Code				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Mobile phone services and equipment lease.				
<input type="checkbox"/> Yes				

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Kohls/Capital One N56 W 17000 Ridgewood Drive Menomonee Falls, WI 53051	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.1</u> of (Check one):	<input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	0080
Name and Address Rainbow Canyon Villages HOA 43525 Ridge Park Drive, Suite 300 Temecula, CA 92590	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.3</u> of (Check one):	<input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 6,879.37
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ 6,879.37
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 2,675.11
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ 2,675.11

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Sprint P.O. Box 4191 Carol Stream, IL 60197-4191	Mobile phone service, contract up to 12/2018

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

- No
 Yes.

In which community state or territory did you live? CA . Fill in the name and current address of that person.

Randy J. Clements, 45377 Clubhouse Drive, Temecula, CA 92592

Name of your spouse, former spouse, or legal equivalent
Number, Street, City, State & Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 **Randy J. Clements
45377 Clubhouse Drive
Temecula, CA 92592**

Schedule D, line 2.1
 Schedule E/F, line _____
 Schedule G _____
Bank of America

3.2 **Randy J. Clements
45377 Clubhouse Drive
Temecula, CA 92592
2010 liability is the only joint debt**

Schedule D, line _____
 Schedule E/F, line 2.1
 Schedule G _____
Internal Revenue Service

Debtor 1 **Lisa Ceran Clements**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.3 **Randy J. Clements**
45377 Clubhouse Drive
Temecula, CA 92592

- Schedule D, line 2.3
 Schedule E/F, line _____
 Schedule G _____
Seterus Inc

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA
Case number (if known)	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Employment status

Debtor 1	Debtor 2 or non-filing spouse
<input type="checkbox"/> Employed	<input type="checkbox"/> Employed
<input checked="" type="checkbox"/> Not employed	<input type="checkbox"/> Not employed

Include part-time, seasonal, or self-employed work.

Occupation

Occupation may include student or homemaker, if it applies.

Employer's name

Employer's address

How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
--------------	-----------------------------------

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross Income. Add line 2 + line 3.

2. \$ 0.00	\$ N/A
3. +\$ 0.00	+\$ N/A
4. \$ 0.00	\$ N/A

Debtor 1 Lisa Ceren Clements

Case number (if known) _____

Copy line 4 here	For Debtor 1	For Debtor 2 or non-filing spouse
4. _____	\$ 0.00	N/A
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ N/A
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ N/A
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ N/A
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ N/A
5e. Insurance	5e. \$ 0.00	\$ N/A
5f. Domestic support obligations	5f. \$ 0.00	\$ N/A
5g. Union dues	5g. \$ 0.00	\$ N/A
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ N/A
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ N/A
8b. Interest and dividends	8b. \$ 0.00	\$ N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 1,400.00	\$ N/A
8d. Unemployment compensation	8d. \$ 0.00	\$ N/A
8e. Social Security	8e. \$ 2,185.90	\$ N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ N/A
8g. Pension or retirement income	8g. \$ 0.00	\$ N/A
8h. Other monthly income. Specify: <u>Cigna Disability Benefits</u> <u>URS Corporation Reimbursement for Health Insurance</u> <u>Additional Amount Paid By Ex-Spouse In Excess of Court-Order</u>	8h.+ \$ 2,561.00	+ \$ N/A
	\$ 483.33	\$ N/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 6,820.23	\$ N/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 6,820.23	+ \$ N/A = \$ 6,820.23
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ 6,820.23	
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA
Case number (If known)	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,650.00

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<u>0.00</u>
4b. \$	<u>16.00</u>
4c. \$	<u>32.00</u>
4d. \$	<u>0.00</u>
5. \$	<u>0.00</u>

Debtor 1	Lisa Ceran Clements	Case number (if known)
6. Utilities:		
6a.	Electricity, heat, natural gas	6a. \$ 200.00
6b.	Water, sewer, garbage collection	6b. \$ 43.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 250.00
6d.	Other. Specify:	6d. \$ 0.00
7. Food and housekeeping supplies		
7.	\$ 345.00	
8. Childcare and children's education costs		
8.	\$ 0.00	
9. Clothing, laundry, and dry cleaning		
9.	\$ 83.00	
10. Personal care products and services		
10.	\$ 36.00	
11. Medical and dental expenses		
11.	\$ 49.00	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.		
12.	\$ 300.00	
13. Entertainment, clubs, recreation, newspapers, magazines, and books		
13.	\$ 200.00	
14. Charitable contributions and religious donations		
14.	\$ 50.00	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a. \$ 0.00
15b.	Health insurance	15b. \$ 430.04
15c.	Vehicle insurance	15c. \$ 122.00
15d.	Other insurance. Specify:	15d. \$ 0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Estimated Federal & State Income Tax		
16.	\$ 745.00	
Specify: IRS Installment Agreement		
16.	\$ 126.00	
17. Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a. \$ 0.00
17b.	Car payments for Vehicle 2	17b. \$ 0.00
17c.	Other. Specify:	17c. \$ 0.00
17d.	Other. Specify:	17d. \$ 0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
18.	\$ 0.00	
19. Other payments you make to support others who do not live with you. Specify: Health Insurance For 19 Year-Old Daughter		
19.	\$ 258.00	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a.	Mortgages on other property	20a. \$ 0.00
20b.	Real estate taxes	20b. \$ 0.00
20c.	Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d.	Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e.	Homeowner's association or condominium dues	20e. \$ 0.00
21. Other: Specify: Storage Rent Exclude Balance Of Social Security Per 11 USC 101(10A)		
21.	+\$ 78.00	
	+\$ 1,807.19	
22. Calculate your monthly expenses		
22a.	Add lines 4 through 21.	\$ 6,820.23
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ 6,820.23
22c.	Add line 22a and 22b. The result is your monthly expenses.	\$ 6,820.23
23. Calculate your monthly net income.		
23a.	Copy line 12 (your combined monthly income) from Schedule I.	\$ 6,820.23
23b.	Copy your monthly expenses from line 22c above.	\$ 6,820.23
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	\$ 0.00
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes.	Explain here: Debtor needs significant dental work for which she has no insurance coverage. The work is expected to cost several thousand dollars, and so will likely increase Debtor's monthly health care expense by \$200 or more per month for an extended period of time.	

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

[REDACTED] Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Lisa Ceran Clements

Lisa Ceran Clements

Signature of Debtor 1

Date September 7, 2017

X

Signature of Debtor 2

Date _____

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No
 Yes. Fill in the details.

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
Sources of income Check all that apply.		Sources of income Check all that apply.	

Debtor 1 Lisa Ceran Clements**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			
	SSI Benefits \$17,472.00		
	Cigna Disability Benefits \$20,488.00		
	Alimony / Maintenance \$11,200.00		
	Additional Funds Above Alimony From Ex-Husband \$1,520.00		
For last calendar year: (January 1 to December 31, 2016)	SSI Benefits \$26,230.80		
	Cigna Disability Benefits \$28,112.47		
	Alimony / Maintenance \$11,000.00		
	Child Support \$4,400.00		
	Additional Funds Above Alimony From Ex-Husband \$2,280.00		
For the calendar year before that: (January 1 to December 31, 2015)	SSI Benefits \$26,230.80		
	Cigna Disability Benefits \$21,576.00		
	Alimony / Maintenance \$3,802.00		
	Child Support \$13,200.00		

Debtor 1 Lisa Ceran Clements**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

■ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Bradley Storer c/o Craig Coutts 39760 Calle Breve Temecula, CA 92592	Monthly rent of \$1,650 on Debtor's residence.	\$4,950.00	\$0.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Rent</u>

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- No

- Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- No

- Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No

- Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
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Debtor 1 Lisa Ceran Clements

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

- No. Go to line 11.
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
Explain what happened			

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- No
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
Explain what happened			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Charity's Name	Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Explain what happened					

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- No
 Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Explain what happened			

Debtor 1 Lisa Ceran Clements

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Serenity Legal Services, P.C. 41667 Ivy Street, Suite F-6 Murrieta, CA 92562 wuhrman@serenitylls.com		5/25/2017	\$3,000.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

- No
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- No
 Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Randy J. Clements 45377 Clubhouse Drive Temecula, CA 92592 Ex-spouse.	Per divorce judgment, 2008 Chrysler Town & Country (valued at \$9,592); 2003 Dodge Ram (\$19,900); 2005 Thor Motor Coach Jazz 2780 (\$3,161); assorted guns.	Per divorce judgment, 2003 Toyota Camry (\$4,445); Easy Up (value unknown); Laptop Table (value unknown); \$35,042 in equalization payments.	12/27/2016, except Thor Motor Coach, 5/2017.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- No
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

Debtor 1 Lisa Ceran Clements

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- No
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- No
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Extra Space Storage 31524 Rancho Pueblo Road Temecula, CA 92592	Only Debtor.	Household goods.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- No
 Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
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Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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25. Have you notified any governmental unit of any release of hazardous material?

- No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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Debtor 1 Lisa Ceran Clements

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
 Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation
 No. None of the above applies. Go to Part 12.
 Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
Clements Aircraft Services Inc. 45377 Clubhouse Drive Temecula, CA 92592	Pilot services. NOTE: Business was actually operated solely by Debtor's ex-husband. Debtor's only involvement in the business was being a shareholder by virtue of community property law. Harold Newman -- tax preparer ONLY.	EIN: 26-1984294 From-To 02/2008 to 04/2016

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No
 Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Lisa Ceran ClementsLisa Ceran Clements
Signature of Debtor 1

Signature of Debtor 2

Date September 7, 2017

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No
 Yes

Debtor 1 Lisa Ceran Clements**Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?** No Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Lisa Ceran Clements		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
---	---	---

Creditor's **Bank of America**

name:

Description of property securing debt: **45377 Clubhouse Drive
Temecula, CA 92592, Riverside
County; debt is listed as
disputed because it is only a
lien against the property, with
no recourse against Debtor**

Surrender the property.

No

Retain the property and redeem it.
 Retain the property and enter into a *Reaffirmation Agreement*.

Yes

Retain the property and [explain]:

Creditor's **Navy Federal Credit Union**

name:

Description of property securing debt: **Checking & Savings: Navy
Federal Credit Union**

Surrender the property.

No

Retain the property and redeem it.
 Retain the property and enter into a *Reaffirmation Agreement*.

Yes

Retain the property and [explain]:

Creditor's **Seterus Inc**

name:

Surrender the property.

No

Retain the property and redeem it.
 Retain the property and enter into a

Yes

Debtor 1 Lisa Ceran Clements

Case number (if known) _____

Description of property securing debt: **45377 Clubhouse Drive
Temecula, CA 92592 Riverside
County**

Reaffirmation Agreement.
 Retain the property and [explain]:

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name: **Sprint**

No

Yes

Description of leased Property: **Mobile phone service, contract up to 12/2018**

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Lisa Ceran Clements

Lisa Ceran Clements

Signature of Debtor 1

X

Signature of Debtor 2

Date

September 7, 2017

Date

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Arnold H. Wuhrman, State Bar No. 167183 SERENITY LEGAL SERVICES, P.C. 41667 Ivy Street, Suite F-6 Murrieta, CA 92562 Tel. 951-304-3720 Fax 951-848-9340 E-mail: Wuhrman@SerenityLLS.com	FOR COURT USE ONLY
<p>Attorney For Debtor(s)</p> <p style="text-align: center;">UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - RIVERSIDE DIVISION</p>	
In re: LISA CERAN CLEMENTS aka LISA KAY CERAN, Debtor(s).	<p>CASE NO.: CHAPTER: 7</p> <p style="text-align: center;">DEBTOR'S ATTORNEY'S DISCLOSURE OF COMPENSATION ARRANGEMENT IN INDIVIDUAL CHAPTER 7 CASE</p> <p style="text-align: right;">[LBR 2090-1(a)(3)]</p>

1. **Compensation Arrangement.** Pursuant to 11 U.S.C. § 329(a), FRBP 2016(b), and LBR 2090-1(a)(3) and (4), I disclose that:
 - a. I am the attorney for the Debtor.
 - b. Compensation that was paid to me, within one year before the petition was filed, or was agreed to be paid to me, for services rendered or to be rendered on behalf of the Debtor in contemplation of or in connection with this bankruptcy case, is as follows:
 - i. For legal services, I have agreed to accept an hourly rate of \$_____; or a flat fee of \$ 3,000
 - ii. Prior to filing this disclosure I received \$ 3,000
 - iii. The balance due is \$ 0.00
2. **Source of Compensation Paid Postpetition (Postpetition Compensation).**
 - a. **Already Paid.** The source(s) of the Postpetition Compensation paid to me was:
 Debtor(s) Other (specify): _____
 - b. **To be Paid.** The source(s) of the Postpetition Compensation to be paid to me is:
 Debtor(s) Other (specify): N/A
3. **Sharing of Compensation Paid Postpetition.**
 I have not agreed to share Postpetition Compensation with any other person unless they are members or regular associates of my law firm within the meaning of FRBP 9001(10).
 I have agreed to share Postpetition Compensation with other person or persons who are not members or regular associates of my law firm within the meaning of FRBP 9001(10). Attached as Exhibit A is a copy of the agreement and a list of the names of the people sharing in the Postpetition Compensation.

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

4. **Limited Scope of Services.** A limited scope of appearance is permitted under LBR 2090-1(a)(3), unless otherwise required by the presiding judge. In return for the fee disclosed above, I have agreed to provide the required legal services indicated below in paragraph "a", and, if any are indicated, the additional services checked in paragraph "4.b".

a. **Services required to be provided:**

- i. Analysis of the Debtor's financial situation, and advice to the Debtor in determining whether to file a bankruptcy petition;
- ii. Preparation and filing of any petition, lists, schedules and statements and any other required case commencement documents; and
- iii. Representation of the Debtor at the initial § 341(a) meeting of creditors.

b. **Additional legal services I will provide:**

- i. Any proceeding related to relief from stay motions.
- ii. Any proceeding involving an objection to the Debtor's discharge pursuant to 11 U.S.C. § 727.
- iii. Any proceeding to determine whether a specific debt is nondischargeable under 11 U.S.C. § 523.
- iv. Reaffirmation of a debt.
- v. Any lien avoidance under 11 U.S.C. § 522(f)
- vi. Other (specify):

Amount paid includes filing fee, cost of pre-filing credit counseling, and cost of post-filing debtor education.

5. If in the future I agree to represent the Debtor in additional matters, I will complete and file the Attorney's Disclosure of Postpetition Compensation, LBR form F 2016-1.4.ATTY.COMP.DISCLSR.

DECLARATION OF ATTORNEY FOR THE DEBTOR

I declare under penalty of perjury that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the Debtor in this bankruptcy case

Date: 09/07/2017

/s/ Arnold H. Wuhrman

Signature of attorney for the Debtor

Arnold H. Wuhrman

Printed name of attorney

Serenity Legal Services, P.C.

Printed name of law firm

DECLARATION OF THE DEBTOR

I/we declare under penalty of perjury that my attorney has explained to me/us the limited scope of representation as outlined above. I/we understand that I/we have paid or agreed to pay solely for the required services listed in paragraph 4a, and the additional services (if any) that are checked off in paragraph 4b above, and that I/we am representing myself/ourselves for any other proceedings unless a new agreement is reached with an attorney.

Date: 09/07/2017

Date: _____

/s/ Lisa Ceran Clements

Signature of Debtor 1

Lisa Ceran Clements

Printed name of Debtor 1

Signature of Debtor 2 (Joint Debtor)(if applicable)

Printed name of Debtor 2

Fill in this information to identify your case:

Debtor 1	Lisa Ceren Clements
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	Central District of California
Case number (if known)	

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
 - 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
 - 3. The Means Test does not apply now because of qualified military service but it could apply later.
- Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- Not married. Fill out Column A, lines 2-11.
- Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
\$ <u>0.00</u>	\$ _____
\$ <u>0.00</u>	\$ _____
\$ <u>2,073.33</u>	\$ _____

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.
5. Net income from operating a business, profession, or farm

Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>
Ordinary and necessary operating expenses	-\$ <u>0.00</u>
Net monthly income from a business, profession, or farm	\$ <u>0.00</u> Copy here -> \$ <u>0.00</u> \$ _____

6. Net income from rental and other real property

Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>
Ordinary and necessary operating expenses	-\$ <u>0.00</u>
Net monthly income from rental or other real property	\$ <u>0.00</u> Copy here -> \$ <u>0.00</u> \$ _____

7. Interest, dividends, and royalties

Debtor 1

Lisa Ceran Clements

Case number (if known) _____

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**

For your spouse \$ _____

\$ **0.00**

\$ _____

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.\$ **0.00**

\$ _____

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.**Cigna Insurance Disability**\$ **2,561.00**

\$ _____

\$ **0.00**

\$ _____

Total amounts from separate pages, if any.

+ \$ **0.00**

\$ _____

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.\$ **4,634.33**

+ \$ _____

= \$ **4,634.33**

Total current monthly income

Part 2: Determine Whether the Means Test Applies to You**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11

Copy line 11 here=>

\$ **4,634.33**

Multiply by 12 (the number of months in a year)

x 12

12b. The result is your annual income for this part of the form

12b. \$ **55,611.96****13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

CA

Fill in the number of people in your household.

1

Fill in the median family income for your state and size of household.

13. \$ **52,416.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
Go to Part 3.14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*
Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Lisa Ceran Clements**Lisa Ceran Clements**

Signature of Debtor 1

Date **September 7, 2017**
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1	<u>Lisa Ceren Clements</u>
Debtor 2	
(Spouse, if filing)	
United States Bankruptcy Court for the:	<u>Central District of California</u>
Case number (if known)	

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

1. There is no presumption of abuse.
 2. There is a presumption of abuse.

Check if this is an amended filing

Official Form 122A - 2 Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Determine Your Adjusted Income

1. Copy your total current monthly income. Copy line 11 from Official Form 122A-1 here=>..... \$ 4,634.33

2. Did you fill out Column B in Part 1 of Form 122A-1?

- No. Fill in \$0 for the total on line 3.
 Yes. Is your spouse Filing with you?
 No. Go to line 3.
 Yes. Fill in \$0 for the total on line 3.

3. Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents. Follow these steps:

On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents?

- No. Fill in 0 for the total on line 3.
 Yes. Fill in the information below:

State each purpose for which the income was used

For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.

Fill in the amount you are subtracting from your spouse's income

\$ _____

\$ _____

\$ _____

\$ 0.00

Copy total here=>... - \$ 0.00

4. Adjust your current monthly income. Subtract line 3 from line 1.

\$ 4,634.33

Debtor 1

Lisa Ceren Clements

Case number (if known) _____

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to *you*, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

- 6. Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ 639.00
- 7. Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$ 49

7b. Number of people who are under 65 X 1

7c. **Subtotal.** Multiply line 7a by line 7b. \$ 49.00 Copy here=> \$ 49.00

People who are 65 years or older

7d. Out-of-pocket health care allowance per person \$ 117

7e. Number of people who are 65 or older X 0

7f. **Subtotal.** Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00

7g. **Total.** Add line 7c and line 7f \$ 49.00

Copy total here=> \$ 49.00

Debtor 1 Lisa Ceren Clements

Case number (if known)

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities - Insurance and operating expenses**
- Housing and utilities - Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ **448.00**
9. **Housing and utilities - Mortgage or rent expenses:**
- 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses..... \$ **1,328.00**
- 9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment				
-NONE-	\$				
Total average monthly payment	\$ 0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (*mortgage or rent expense*). If this amount is less than \$0, enter \$0. \$ **1,328.00** **Copy here=>** \$ **1,328.00**

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** \$ **0.00**

Explain why:

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
- 1. Go to line 12.
- 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ **500.00**

Debtor 1

Lisa Ceran Clements

Case number (if known) _____

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1:13a. Ownership or leasing costs using IRS Local Standard..... \$ **0.00**

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
-NONE-	\$ _____
Total Average Monthly Payment	\$ <u>0.00</u> Copy here => -\$ <u>0.00</u> Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0.

\$ <u>0.00</u>	Copy net Vehicle 1 expense here => \$ <u>0.00</u>
-----------------------	--

Vehicle 2 Describe Vehicle 2:13d. Ownership or leasing costs using IRS Local Standard..... \$ **0.00**

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
\$ _____	
Total Average Monthly Payment	\$ <u>0.00</u> Copy here => -\$ <u>0.00</u> Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from line 13d. if this amount is less than \$0, enter \$0.

\$ <u>0.00</u>	Copy net Vehicle 2 expense here => \$ <u>0.00</u>
-----------------------	--

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation. \$ **0.00**
15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*. \$ **0.00**

Debtor 1

Lisa Ceran Clements

Case number (if known) _____

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.
Do not include real estate, sales, or use taxes. \$ 743.25
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$ 0.00
18. **Life Insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ 0.00
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. \$ 0.00
20. **Education:** The total monthly amount that you pay for education that is either required:
 as a condition for your job, or
 for your physically or mentally challenged dependent child if no public education is available for similar services. \$ 0.00
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.
Do not include payments for any elementary or secondary school education. \$ 0.00
22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.
Payments for health insurance or health savings accounts should be listed only in line 25. \$ 0.00
23. **Optional telephone and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. +\$ 0.00
24. **Add all of the expenses allowed under the IRS expense allowances.**
Add lines 6 through 23. \$ 3,707.25

Debtor 1

Lisa Cera Clements

Case number (if known) _____

Additional Expense Deductions These are additional deductions allowed by the Means Test.

Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance	\$ <u>815.89</u>
Disability insurance	\$ <u>0.00</u>
Health savings account	<u>+ \$ 0.00</u>
Total	\$ <u>815.89</u>

Copy total here=> \$ 815.89

Do you actually spend this total amount?

 No. How much do you actually spend? Yes

\$ _____

26. **Continued contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).

\$ 0.00

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

\$ 0.00

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

\$ 0.00

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

\$ 0.00

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

\$ 0.00

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

+\$ 0.00

32. **Add all of the additional expense deductions.**

Add lines 25 through 31.

\$ 815.89

Debtor 1

Lisa Ceren Clements

Case number (if known) _____

Deductions for Debt Payment**33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home:

33a. Copy line 9b here => \$ **0.00**

Loans on your first two vehicles:

33b. Copy line 13b here => \$ **0.00**

33c. Copy line 13e here => \$ **0.00**

33d. List other secured debts:

Name of each creditor for other secured debt

Identify property that secures the debt

Does payment include taxes or insurance?

-NONE- No Yes

\$ _____

 No Yes

\$ _____

 No Yes

+\$ _____

33e. Total average monthly payment. Add lines 33a through 33d \$ **0.00** Copy total here=> \$ **0.00**

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

- No. Go to line 35.
 Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor

Identify property that secures the debt

Total cure amount

Monthly cure amount

-NONE-

\$ _____ ÷ 60 = \$ _____

Total \$ **0.00**Copy total here=> \$ **0.00****35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.**

- No. Go to line 36.
 Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims \$ **3,433.51** ÷ 60 = \$ **57.23**

Debtor 1

Lisa Ceran Clements

Case number (if known) _____

36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e).

For more information, go online using the link for *Bankruptcy Basics* specified in the separate instructions for this form. *Bankruptcy Basics* may also be available at the bankruptcy clerk's office.

No. Go to line 37.

Yes. Fill in the following information.

Projected monthly plan payment if you were filing under Chapter 13 \$ _____

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). X _____

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense if you were filing under Chapter 13 \$ _____

Copy total here=> \$ _____

\$ **57.23**

37. Add all of the deductions for debt payment.

Add lines 33e through 36.

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances \$ **3,707.25**

Copy line 32, All of the additional expense deductions \$ **815.89**

Copy line 37, All of the deductions for debt payment +\$ **57.23**

Total deductions \$ **4,580.37**

Copy total here.....=> \$ **4,580.37**

Part 3: Determine Whether There is a Presumption of Abuse

39. Calculate monthly disposable income for 60 months

39a. Copy line 4, adjusted current monthly income \$ **4,634.33**

39b. Copy line 38, Total deductions -\$ **4,580.37**

39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).
Subtract line 39b from line 39a

\$ **53.96** Copy here=>\$ **53.96**

For the next 60 months (5 years) x 60

39d. Total. Multiply line 39c by 60

39d. \$ **3,237.60**

Copy here=>

\$ **3,237.60**

40. Find out whether there is a presumption of abuse. Check the box that applies:

The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, *There is no presumption of abuse*. Go to Part 5.

The line 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, *There is a presumption of abuse*. You may fill out Part 4 if you claim special circumstances. Go to Part 5.

The line 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41.

*Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1

Lisa Ceran Clements

Case number (if known) _____

41. 41a. **Fill in the amount of your total nonpriority unsecured debt.** If you filled out *A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules* (Official Form 106Sum), you may refer to line 3b on that form.

\$ _____
x .25

- 41b. **25% or your total nonpriority unsecured debt.** 11 U.S.C. § 707(b)(2)(A)(i)(I)

Multiply line 41a by 0.25.....

\$ _____

Copy here=> \$ _____

42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.

Check the box that applies:

- Line 39d is less than line 41b.** On the top of page 1 of this form, check box 1, *There is no presumption of abuse*. Go to Part 5.
- Line 39d is equal to or more than line 41b.** On the top of page 1 of this form, check box 2, *There is a presumption of abuse*. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

Part 4: Give Details About Special Circumstances

43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B).

No. Go to Part 5.

Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.

Give a detailed explanation of the special circumstances

Average monthly expense or income adjustment

\$ _____
\$ _____
\$ _____
\$ _____

Part 5: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

/s/ Lisa Ceran Clements

Lisa Ceran Clements

Signature of Debtor 1

Date September 7, 2017

MM / DD / YYYY

Attorney or Party Name, Address, Telephone & FAX Nos., FOR COURT USE ONLY

State Bar No. & Email Address

Arnold H. Wuhrman

41667 Ivy Street

Suite F-6

Murrieta, CA 92562

951-304-3720 Fax: 951-848-9340

California State Bar Number: 167183

Wuhrman@SerenityLLS.com

Debtor(s) appearing without an attorney

Attorney for Debtor

**UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA**

In re:

Lisa Ceran Clements

CASE NO.:

CHAPTER: 7

**VERIFICATION OF MASTER
MAILING LIST OF CREDITORS**

[LBR 1007-1(a)]

Debtor(s).

Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 3 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: September 7, 2017

/s/ Lisa Ceran Clements

Signature of Debtor 1

Date: _____

Signature of Debtor 2 (joint debtor) (if applicable)

Date: September 7, 2017

/s/ Arnold H. Wuhrman

Signature of Attorney for Debtor (if applicable)

Lisa Ceran Clements
44984 Bellflower Lane
Temecula, CA 92592

Arnold H. Wuhrman
Serenity Legal Services, P.C.
41667 Ivy Street
Suite F-6
Murrieta, CA 92562

Bank of America
PO Box 31785
Tampa, FL 33631-3785

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Kohl's/Capital One
PO Box 3043
Milwaukee, WI 53201-3043

Kohls/Capital One
N56 W 17000 Ridgewood Drive
Menomonee Falls, WI 53051

Law Office of H. William Edgar
6800 Indiana Ave., Suite 150
Riverside, CA 92506

Navy Federal Credit Union
PO Box 3000
Merrifield, VA 22119

Navy Federal Credit Union
PO Box 3700
Merrifield, VA 22119

Rainbow Canyon Villages HOA
c/o S&L Association Management
PO Box 929
Murrieta, CA 92564

Rainbow Canyon Villages HOA
43525 Ridge Park Drive, Suite 300
Temecula, CA 92590

Randy J. Clements
45377 Clubhouse Drive
Temecula, CA 92592

Real Time Resolutions
4909 Savarese Circle
Tampa, FL 33634

Real Time Resolutions
Attn: Bankruptcy
PO Box 36655
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